

# CLAIMS ONLY

Application Number

Filing Date

10/613627

Applicant(s)

07-18-07

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend	Indep.	Depend	Indep.	Depend
1			1			
2				1		
3				1		
4				1		
5				1		
6			1			
7				1		
8				1		
9				1		
10				1		
11				1		
12				1		
13			1			
14				1		
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49						
50						
Total Indep			4			
Total Depend			19			
Total Claims			23			

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						